

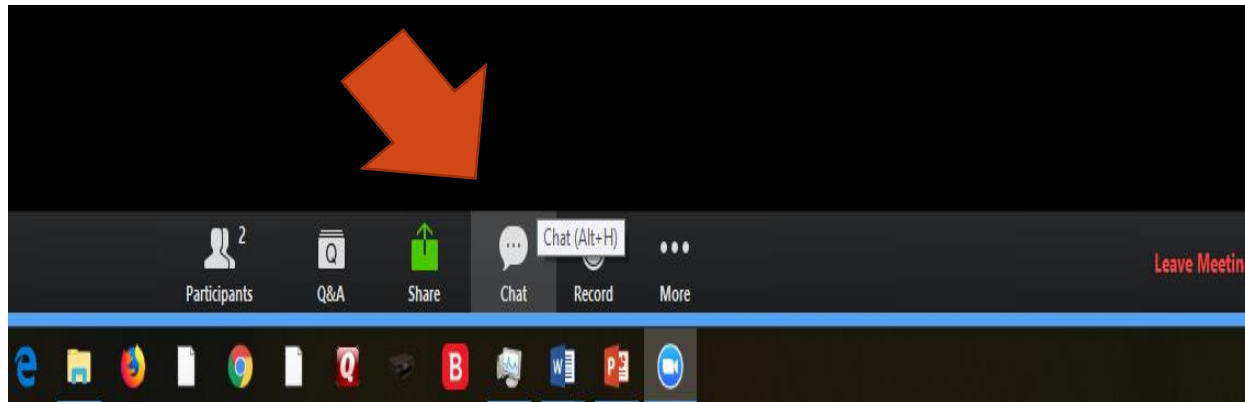


Parents as Observers, Teachers & Lookouts

By
Harold Johnson, Ed.D.
Professor Emeriti – Kent State University

Webinar Communication

Use the Chat Box feature at the bottom of your screen to make a comment or ask a question.



We will pause periodically to allow ASL users to make comments or ask questions using the interpreter.

Washington Hands & Voices

“We envision a world where children who are deaf and hard of hearing have every opportunity to achieve their full potential.”



Purpose of Family Webinars

To provide knowledge to families in order to increase well-being and confidence ensuring family involvement and leadership when supporting their deaf, deafblind or hard of hearing child. Such involvement is cornerstone to increased child outcomes.



Who is attending today?

- Polling Questions



- This presentation is being provided as a component of the [Hands & Voices - O.U.R. Children Project](#).
 - The Observe, Understand & Respond (O.U.R.) Project is a nation wide effort that began in 2009 to enhance the safety and success of children who are deaf/hard of hearing (d/hh).
 - The Project carries out training and develops material to increase awareness, establish understanding, and implement programs to prevent, and when necessary respond, to instances of maltreatment as experienced by children who are d/hh
 - Key resources concerning the Project can be found at:
 - [Brief video description](#)
 - [Parent focused resources](#)
 - [Professional focused resources](#)



- You already work to insure the safety of your children by:

- Using car seats



- Giving them healthy food



- Providing a safe place to sleep



- Preventing falls



- Teaching them how to swim



- Teaching them how to be safe with a new pet



- Preventing electrical shock



- Teaching them how to avoid burns



- + so **MUCH** more!

- It is also critical that you work to ensure your child's physical and emotional safety when they are in the care of other individuals, i.e., “people safety.”



- This need is based on the fact that very young children (ages 0-3 yrs) experience the greatest incidence of child maltreatment, i.e., neglect and abuse.



- The maltreatment is predominately carried out by adults, or older children, that are both known and trusted by the child's parents.



- Due to differences in health, cognition, behavior, communication and mobility, children with disabilities are at increased risk of maltreatment.



- This presentation is designed to address the maltreatment risks by providing parents and Early Intervention professionals with the knowledge, skills and resources needed to effectively:
 - **Step 1:** Observe, understand, document and share your children's emerging communication skills;
 - **Step 2:** Encourage your children's development and use of communication and social skills that enhance safety; and
 - **Step 3:** Determine which individuals should be entrusted with the care of your children.
- Resources will also be provided re. the use of IFSP/IEP documents to enhance child safety.



Step 1: Parents as Observers...

- Parents are the individuals who spend the most time observing, interacting, encouraging, trying to figure out and then responding to the meaning of their children's behaviors.
- Daily routines of:

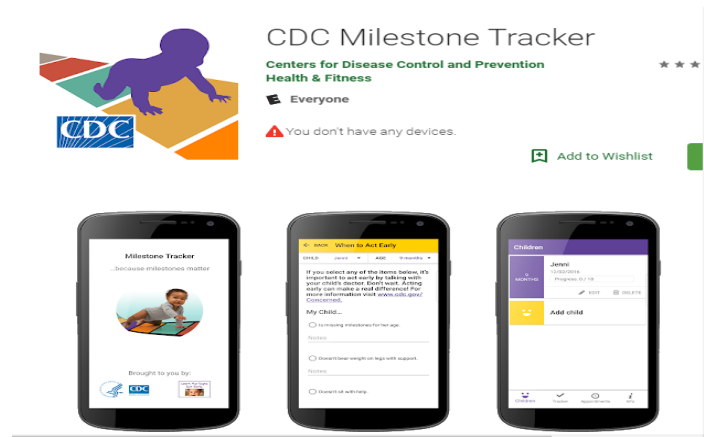
- eating;
- playing;
- exploring;
- diapering; and
- sleeping



provide parents with the essential contexts needed to interact, understand and nurture their child.

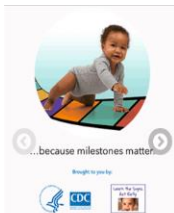


- The Center for Disease Control (CDC) has developed a Milestone Tracker App to assist parents in observing, understanding, responding, nurturing, documenting, tracking and sharing their child's development from 2 months to 5 years of age.
- The *APP can be downloaded for free on iOS and Android devices in either English and Spanish!



***Note:** A pdf copy of milestones can also be downloaded and printed.

- Features of the App include:
 - **Add a Child** – enter personalized information about your child or multiple children;
 - **Milestone Tracker** – track your child’s developmental progress by looking for important milestones using an interactive, illustrated checklist;
 - **Milestone Photos and Videos** – know what each milestone looks like so that you can better identify them in your own child;
 - **Tips and Activities** – support your child’s development at every age
 - **When to Act Early** – know when it’s time to “act early” and talk with your child’s doctor about developmental concerns;
 - **Appointments** – keep track of your child’s doctors’ appointments and get reminders about recommended developmental screenings; and
 - **Milestone Summary** – get a summary of your child’s milestones to view, and share with or email to your child’s doctor and other important care provider.



- Sample App info:

Your Baby at 9 Months



Child's Name _____

Child's Age _____

Today's Date _____

How your child plays, learns, speaks, acts, and moves offers important clues about your child's development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by the end of 9 months. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

What Most Babies Do at this Age:

Social/Emotional

- May be afraid of strangers
- May be clingy with familiar adults
- Has favorite toys

Language/Communication

- Understands "no"
- Makes a lot of different sounds like "mamamama" and "bababababa"
- Copies sounds and gestures of others
- Uses fingers to point at things

Cognitive (learning, thinking, problem-solving)

- Watches the path of something as it falls
- Looks for things he sees you hide
- Plays peek-a-boo
- Puts things in her mouth
- Moves things smoothly from one hand to the other
- Picks up things like cereal o's between thumb and index finger

Movement/Physical Development

- Stands, holding on
- Can get into sitting position

Act Early by Talking to Your Child's Doctor if Your Child:

- Doesn't bear weight on legs with support
- Doesn't sit with help
- Doesn't babble ("mama", "baba", "dada")
- Doesn't play any games involving back-and-forth play
- Doesn't respond to own name
- Doesn't seem to recognize familiar people
- Doesn't look where you point
- Doesn't transfer toys from one hand to the other

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO (1-800-232-4636).

The American Academy of Pediatrics recommends that children be screened for general development at the 9-month visit. Ask your child's doctor about your child's developmental screening.

Adapted from CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Fifth Edition, edited by Steven Shelov and Tanya Remer Altmann © 1991, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS.

Help Your Baby Learn and Grow



You can help your baby learn and grow. Talk, read, sing, and play together every day. Below are some activities to enjoy with your 9-month-old baby today.

What You Can Do for Your 9-Month-Old:

- Pay attention to the way he reacts to new situations and people; try to continue to do things that make your baby happy and comfortable.
 - As she moves around more, stay close so she knows that you are near.
 - Continue with routines; they are especially important now.
 - Play games with "my turn, your turn."
 - Say what you think your baby is feeling. For example, say, "You are so sad, let's see if we can make you feel better."
 - Describe what your baby is looking at; for example, "red, round ball."
 - Talk about what your baby wants when he points at something.
 - Copy your baby's sounds and words.
 - Ask for behaviors that you want. For example,
- Teach cause-and-effect by rolling balls back and forth, pushing toy cars and trucks, and putting blocks in and out of a container.
 - Play peek-a-boo and hide-and-seek.
 - Read and talk to your baby.
 - Provide lots of room for your baby to move and explore in a safe area.
 - Put your baby close to things that she can pull up on safely.

Milestones In Action : By Nine Months

[Español \(Spanish\)](#)

Milestones Photo and Video Library

Social/Emotional

Language/Communication

Cognitive

Movement/Physical Development



[Low Resolution Video](#)

May be afraid of strangers

Description

In this video, a baby girl shows she is afraid of the woman she doesn't know, a 9-month social/emotional milestone.

[Right click here and select "Save Target As..." to download the video](#)



[Low Resolution Video](#)

May be clingy with familiar adults

Description

By clinging to her mother, this baby is showing a 9-month social/emotional milestone.

[Right click here and select "Save Target As..." to download the video](#)



[Low Resolution Video](#)

Has favorite toys

Description

This baby is excited when she sees her favorite toy. Having favorite toys is a 9-month social/emotional milestone.

[Right click here and select "Save Target As..." to download the video](#)



- The developmental progressions in the CDC Milestone App do not include information specific to children with disabilities, e.g., those who are deaf/hard of hearing (d/hh).



- As a result, while the CDC App provides the what, when, and why of the developmental progression, the how, i.e., how **your** child communicates, may look different.



- Therefore, as a parent of a child who is d/hh you have a unique and invaluable perspective concerning how your child's communicates.



- Unfortunately, many individuals without your perspective may miss, or misunderstand, the occurrence, or meaning of your children's communicative behaviors.

- As a result, you may need to document and share when and **how** your child communicates so that others can effectively understand and respond to your child.



- It is therefore suggested that you use the CDC Milestones to guide your recording, e.g. via the camera on your phone, of “what’s new” in the developmental progression of your child’s communicative behaviors.

- The resulting combination of CDC milestones documentation and your pictures will provide an effective tool to inform others regarding how your child communicates.

Language/Communication

- Understands "no"
- Makes a lot of different sounds like "mamama" "bababababa"
- Copies sounds and gestures of others
- Uses fingers to point at things



- This tool, in turn, increases the likelihood that individuals who care for your child will be able to effectively observe, understand and respond to your child's communicative behaviors.

- The resulting understanding and responsiveness is critical to the safety and success of your child.



- This understanding will also help you to effectively recognize any changes in the behavior or appearance of your child.

Step 2: Safety Communication Skills...

- Living with infants/toddlers is a life full of joy **AND** drama!

The kids are:

- Happy...



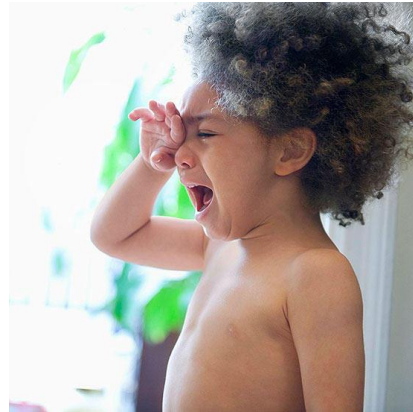
- Sad.....



- Angry.....



- Sleepy...



- Scared.....



- Friendly.....



- Loving...



- Surprised.....



- Upset.....



- Hungry...



- Not hungry.....



- Not hungry for “**That!**”.....



- And then there are the unknowns, the ones that you have to guess at the meaning or cause...



- Children's safety is enhanced when they have the language to express how they feel.
- The CDC Milestone Tracker identifies the typical emotional and language development of children

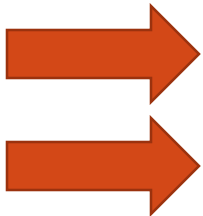
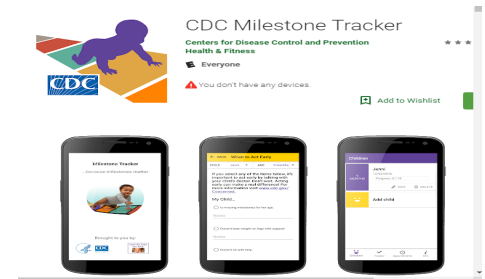
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Movement/Physical Development

- Stands, holding on
- Can get into sitting position

Act Early by Talking to Your Child's Doctor if Your Child:

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Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO (1-800-232-4636).

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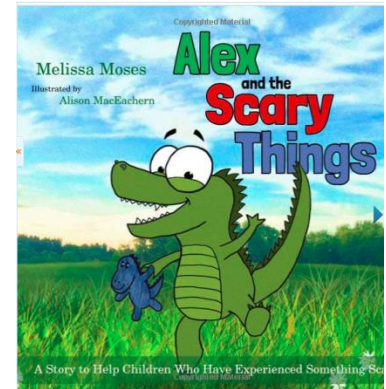
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- To assist your child acquisition the vocabulary of emotions you simply need to “name,” or describe, the emotions that...
 1. ...you observe your child expressing; &
 2. ...use the same vocabulary to describe your own emotions.



- Once your child begins to communicate what you consider to be a “good enough” approximation (i.e., baby talk) of the emotions vocabulary, you reinforce your child’s approximation by once again modeling the vocabulary and responding to their needs.

- This responsiveness supports your child’s gradual use of increasingly “adult like” use of emotions vocabulary.



[Bok URL](#)

- Your child’s ability to effectively communicate how they feel enhances their safety by giving them the ability to tell you how they feel after an experience.



- Experiences that were fun, happy, etc. can be repeated.



- Experiences that were scary, painful, etc. should be stopped and investigated.



- If your child can not communicate how they feel, you can not know if they are safe.



- If you do not know your child is safe, you cannot prevent, or respond, to the maltreatment of your child.



- Your child's safety is also enhanced when they are able to communicate the names of their basic body parts, e.g., eye, finger, belly, etc.



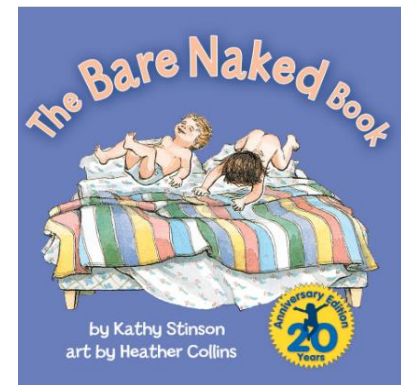
- Day to day activities provide you with ample opportunities to name parts of your child's body as you care for their needs and play with them.



- Use the same strategies for teaching your child the names of their body parts as you did for teaching them emotions vocabulary.



- Reading to and looking at books with your child is a GREAT way to engage them on this topic.



[Book URL](#)

- If your child can not name, or point to, the part of their body that hurts, then your ability to understand why they are upset is hindered.



- If you do not know why they are upset, your ability to comfort them and to protect them from further harm is diminished.



- One last language skill that enhances the safety of your child is the word “No.”
- The CDC Milestone tracker indicates that acquisition of the “No” concept and a possible fear of strangers occurs at nine months of age.

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Movement/Physical Development

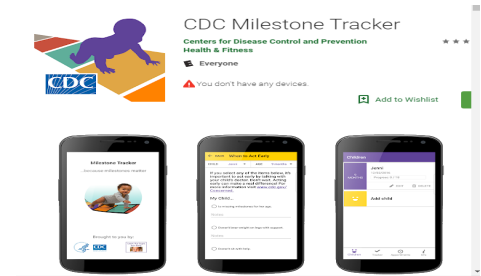
- Stands, holding on
- Can get into sitting position

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The American Academy of Pediatrics recommends that children be screened for general development at the 9-month visit. Ask your child's doctor about your child's developmental screening.



- The reality is that many children with disabilities are expected to be compliant, i.e., to do what they are told, often without a good understanding of what they are doing.



- This compliance makes them particularly vulnerable to maltreatment.
- As a result, it is critical that they learn how and when they can say “No” and what to do if that right is not respected.

- Learning when and how to say “No” begins with choices.



- While toddlers do not get to decide if they brush their teeth or take a bath, they can be given other choices.



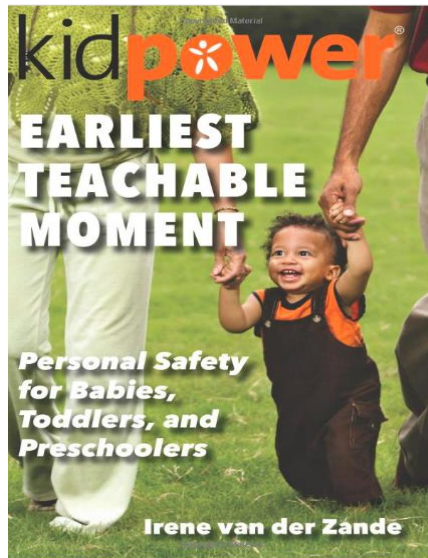
- In making these choices children begin to learn they can decide what to do, that their choice matters.



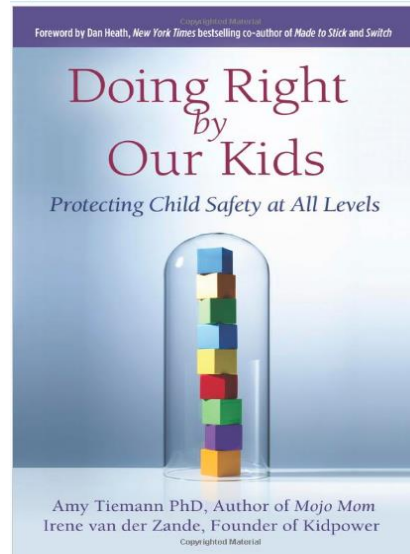
- While they may not always be happy with the choices they have, they begin to learn when and how they can say “No.”



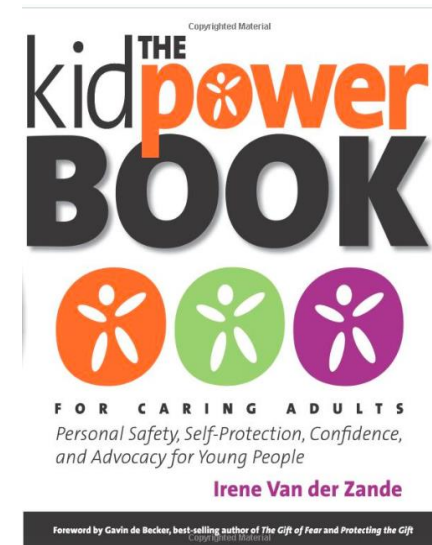
- Irene van der Zande/Kidpower Founder and Executive Director at Kidpower, Full Power, Teen Power International has written extensively on how to enhance the safety of both children and adults, including those with disabilities.



[Book URL](#)



[Book URL](#)



[Book URL](#)

- The right to say “No” represents a key element of Irene’s work.

- Irene notes that children should not be required to give affection if they do not want to.



- For example if a relative or friend wants to hold, or hug, a child and the child indicates that they do not want to, the child's choice should be respected. Instead of a hug, the child can be taught to wave, say "Hello," or shake the person's hand.



- Irene also describes how touch or play for fun or affection should always be a choice.



- In the Kidpower text entitled *Earliest Teachable Moments: Personal Safety for Babies, Toddlers and Preschoolers* the rule for touch or play for fun or affection should...
 - ...be safe
 - ...the choice of each person
 - ...allowed by the adult in charge
 - ...never be kept a secret.



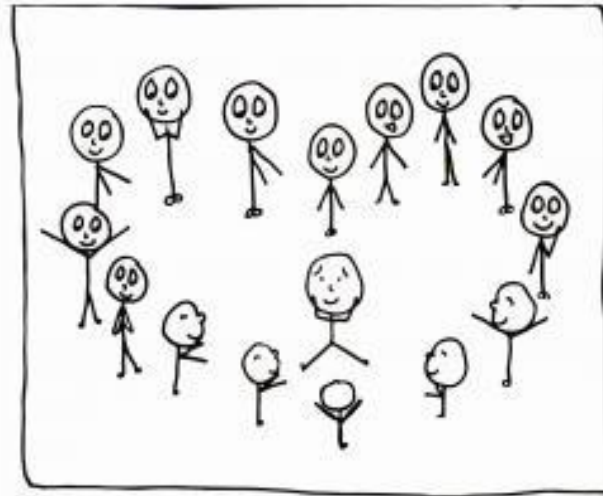
- The initial safety language skills are:
 - Learning the vocabulary of emotions and basic body parts.
 - Learning how and when to say “No.”
 - Learning that touch is a choice.



- These skills, combined with your ability to observe, understand and share the meaning of your child’s communicative behaviors will enhance the safety and success of your child by creating a responsive, emotionally secure, nurturing and language rich environment for your child to grow.
- One final skill must be discussed regarding that safety, the skill to determine which individuals, be they adults or older children, are allowed to be alone with your child.

Step 3: Establishing a “Circle of Trust” ..

- How can you determine who should be given the privilege of being alone with your child?



- Who are the individuals, be they adults, or older children, that you are confident will always act for the well being of your child and who will follow your safety rules?

- In the Kidpower text entitled *Doing Right by Our Kids* a “Circle of Trust” is described as being composed of individuals who have privacy and control over a child.
 - Privacy is described as being alone with the child.
 - Control is described as having more power than the child.



- In the Kidpower text entitled *Earliest Teachable Moments: Personal Safety for Babies, Toddlers and Preschoolers* criteria for who should be allowed in your “Circle of Trust” are presented.
 - “Good cleanliness practices” – especially with food prep...
 - “Age-appropriate protection from hazards...”
 - “Clear boundaries[established by the parent] about touch, teasing and play between adults and children.”
 - “Effective, respectfully behavior management...”



- “Adequate supervision so that adults see what is happening with children...”
- “Specific permission [required] from parents” for any changes in the expected routines
- “Age appropriate activities” for the child
- “Permission for older children to always be able to call [parent] if they need help.”



- Kidpower safety strategies also include:
 - “Research carefully who will be with your children.”
 - “Take the time to keep checking in, including making unexpected visits.”
 - “Raise concerns right away about any potential problems.”
 - “Notice changes in personnel, location, policies, and activities that may affect your child.



- I have provided you with the basic information concerning choosing and monitoring individuals in a “Circle of Trust.”
- More information re. this and MANY related topics can be found at the [Kidpower Web site](#).
- I would urge you to look particularly at the “7 Kidpower Strategies for Keeping Your Child Safe”
 - [Web site](#)
 - [YouTube videos](#)

7 kidpower Strategies for Keeping Your Child Safe

1. Put Safety First
2. Keep your radar on
3. LISTEN to your children - and teach them not to keep unsafe secrets
4. Make SURE kids know you care
5. Don't let kids throw stones at safety or respect
6. Assess each child and make Safety Plans
7. Prepare children to take charge of their safety by practicing skills

kidpower.org | 30 years

Summary

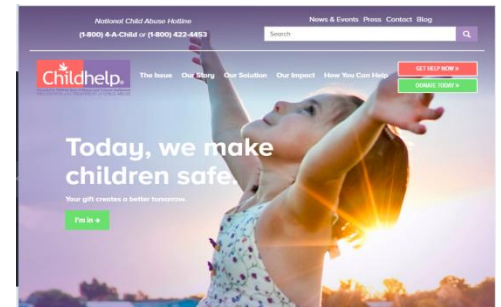
- **Step 1:** Observe, Document & Share...your child's emerging communicative behaviors
- **Step 2:** Teach...your child vocabulary for emotions, body parts and “No” + rules of “touch”
- **Step 3:** “Circle of Trust”...choice and monitoring of who is allowed to be alone with and have control over your child.



- These steps are designed to add “People Safety” to your child's life

Resources

- Personal
 - If you are ever concerned for the safety of child, yourself, or someone else, call 1-800-4-A-CHILD (1 800 422-4453), or text 1-800 – 422-4453
 - This number will connect you with a counselor at the [ChildHelp](#) - [National Abuse Hotline](#)
 - The call is both free and confidential.
 - The Hotline counselor will you to understand what you are experiencing, or seeing and provide you with the information and support you need to act.



- Parents:
 - [Hands & Voices](#) – [O.U.R. Children Project](#) Web resources
- Professionals:
 - [Deaf Education Web site](#) – [Knowledge Page](#) – O.U.R. Children Project Web resources, e.g.,
 - [IFSP & IEP Safety Checklist](#)
 - [Professional organizations that support the inclusion safety objectives into educational planning documents](#)
 - [Silence is NOT an Option documents](#)
 - Council for Exceptional Children:
 - [Policy on the Prevention of and Response to Maltreatment](#)
- Parents & Professionals:
 - [Kidpower, Teen Power, Full Power International](#) Web resources

Summary Survey



Contact Information

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 - Board Member/Kidpower
 - 3hajohnson@gmail.com



Washington Hands & Voices

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info@wahandsandvoices.org



Questions

